# Application Data Sheet

Application Number::

Subject Matter::

# **APPLICATION INFORMATION**

Filing Date::	
Application Type::	Regular

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?:: None

Number of CD Disks:

Number of Copies of CDs::

Sequence Submission?::

Computer Readable Form (CRF)?:: No

Number of Copies of CRF::

Title:: SPRAYING SYSTEM WITH AUTOMATED NOZZLE

Utility

**CLEANING DEVICE** 

Attorney Docket Number:: 225518

Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure:: 2
Total Drawing Sheets:: 5

Small Entity?:: No

Latin Name::

Variety denomination name::

Petition Included?:: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

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#### APPLICANT INFORMATION

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: David

Middle Name::

Family Name:: Proulx

Name Suffix:: Jr.

City of Residence:: P.O. Box 395

State or Prov. of Residence:: New Hampshire

Country of Residence:: US

Street of mailing address:: P. O. Box 395

City of mailing address:: Franklin

State or Province of mailing address:: New Hampshire

Country of mailing address:: US

Postal or Zip Code of mailing address:: 03235

#### CORRESPONDENCE INFORMATION

Correspondence Customer Number:: 23460

Phone:: (312) 616-5600

Fax:: (312) 616-5700

E-mail Address:: mail@leydig.com

#### REPRESENTATIVE INFORMATION

Representative Customer Number:: 23460

Representative Designation:: Registration Number:: Representative Name::

Primary 24703 Dennis R. Schlemmer

Associate 41397 Y. Kurt Chang

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## **DOMESTIC PRIORITY INFORMATION**

Application::

Continuity Type::

Parent Application::

Parent Filing Date::

This is a

Non Provisional of

60/433,663

12/16/02

## FOREIGN APPLICATION INFORMATION

Country::

Application Number:: Filing Date::

**Priority Claimed** 

#### **ASSIGNEE INFORMATION**

Assignee name::

Spraying Systems Co.

Street of mailing address:: P.O. Box 6900

North Avenue at Schmale Road

City of mailing address::

Wheaton

State or Province of

mailing address::

Illinois

Country of mailing

address::

US

Postal or Zip Code of

mailing address::

60189-7900

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